

CLAIMS ONLY

Application Number

Filing Date

10	500	769
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Applicant(s)	
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* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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50						
Total Indep	7		7			
Total Depend	23		23			
Total Claims	30		30			